

# CLAIMS ONLY

SERIAL NO.

FILING DATE

APPLICANT(S)

BEST AVAILABLE COPY

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/	/				
2		/				
3		/				
4		/				
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7		/				
8		/				
9		/				
10		/				
11		(0)				
12		/				
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17		/				
18	/					
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TOTAL IND.	4	↓		↓		↓
TOTAL DEP.	16	⇐		⇐		⇐
TOTAL CLAIMS	20					

	☆		☆		☆	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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100						
TOTAL IND.		↓		↓		↓
TOTAL DEP.		⇐		⇐		⇐
TOTAL CLAIMS						

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS